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profession of the United States has been most gratifying to the Bureau and to the State boards of health. As many physicians desired to help in this important public health work, the Public Health Service and various State boards of health have had re-printed a manual for the treatment of venereal diseases, first issued to the medical officers of the Army. This manual has been revised for civilian use, and a chapter on gonorrhea in women inserted therein. All physicians agreeing to cooperate with the service and State boards of health in the venereal disease control program are being furnished a copy of this manual, either from the Bureau or from their State board of health. This action on the part of the physicians of the country will have a very wholesome tendency toward standardizing the treatment of venereal diseases in accordance with the methods approved by the leading venereal disease experts of the country.

It was said, up to the first of the present year, that the people were not yet ready to support such a campaign as is now being carried on. Quite to the contrary, it has everywhere been found that the people are intensely interested in this problem; that they are astounded at the facts shown by the draft as to the prevalence of venereal diseases in the civilian population; and that they are now determined that the venereal diseases shall be checked and their great prevalence reduced as far as possible. The support of the people in this work is absolutely assured.

THE SALIVA IN PELLAGRA.

Attention is invited to the technical paper printed on page 1068 embodying the results of laboratory investigations carried on by the Public Health Service at its pellagra hospital in Spartanburg, S. C. This paper gives some interesting data on the character of the saliva in patients suffering from pellagra.

It is well known that in pellagra the condition of the mouth, and especially of the tongue, is of considerable significance in establishing a correct diagnosis. In true pellagra the tongue is vividly red and more or less swollen. The literature also speaks of salivation as a symptom of pellagra.

The very careful quantitative studies made in these investigations showed that, though there were cases of increased salivary flow, the salivation spoken of by the patients was often apparent rather than real and was seemingly due to some inhibition of swallowing combined with a peculiar, ropy change in the saliva which made its presence in the mouth more obvious. A tendency toward a greater quantity of solids in the saliva of pellagra patients was also observed.

The investigations indicate that the diastatic power of the saliva of pellagra patients is at least as great as that of normal people. In no case, whether the flow of saliva was scanty or very copious, was the diastatic power lacking.

While the amount of mucus precipitated from saliva by acetic acid was greater for the saliva of the pellagra patients than for the controls, the increase is apparently unrelated to the severity of the symptoms, either general or oral.

The study of the sulphocyanate content of the saliva disclosed that this is much less marked in the case of pellagra patients than it is in the saliva of normal people. Since it is generally admitted that the sulphocyanate arises from the metabolism of protein and the detoxicating action of the system, whereby poisonous cyanides are converted into the relatively innocuous sulphocyanate, the investigators believe that in the pellagra patients there is both a lessened protein intake and a detoxicating power feebler than normal.

The reaction of the saliva in pellagra is somewhat more alkaline than is that of normal saliva.

THE SCHICK TEST AND ACTIVE IMMUNIZATION AGAINST DIPHTHERIA.

One of the pioneers in the introduction of diphtheria antitoxin into this country, and in other measures for the administrative control of diphtheria, the New York City Health Department is taking steps to secure the adoption of two additional measures for the control of this disease, namely, the employment of the Schick test in order to discover susceptible individuals and the active immunization of such individuals by means of toxin-antitoxin mixtures.

In their WEEKLY BULLETIN of March 15, the New York authorities call attention to the fact that, although there has been a continuous reduction in the death rate from diphtheria, "the mortality from this disease is still much higher than it should be, when we consider the armamentarium at hand for preventive and curative work." In New York City, despite the excellent results of antitoxin treatment, diphtheria still causes over 1,000 deaths annually, approximately 20 per 100,000 population. Rates only a little less than this prevail in Rhode Island, Pennsylvania, Kentucky, North Carolina, Massachusetts, and Michigan.

As a result of extensive studies by means of the Schick test conducted under the direction of Dr. W. H. Park, mainly among the charges of various child-caring institutions, it has been found that